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United States Bankruptcy Court

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Hagtern	District	of Pennsy	Ivania
Luctorn	70101101	or roundy.	

In re:

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: Case No.: 13 - 15577 - TEF

Ana Virginia Cruz

Ana Virginia Cruz	: CERTIFICATION OF BUSINESS DEBTO REGARDING MONTHLY REPORT
I, Ama Virginia	Cruz, being of full age and duly sworn upon
my oath, depose(s) and say(s):	

- 1. I am the business Debtor(s) in the above referenced matter.
- 2. I have completed and attached a Monthly Financial Report for the month of BPULY 2016.
- 3. All of the information in the Monthly Financial Report is complete, true and correct to the best of my knowledge, information and belief.

This certification and all attachments shall be filed with the Clerk of the United States Bankruptcy Court, the United States Trustee and the Chapter 13 Standing Trustee in accordance with Section 1304 and Section 704(8) of the United States Bankruptcy Code.

Date:	11/14/16	Cercifor)		
		manuscript in the manuscript of the second control of		Debto
			v	
Date:		<u> </u>		Debto

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IN THE MATTER OF:	ase No. 13-15577	
Ara Virginia Cruz	PETITION FILED: 6-25	-13
11 des and 2 "	MONTHLY REPORT NO. 34	
DEBTOR IN POSSESSION	MONTH ENDED 4-3.0-20	7/6
,	, '	
ALL ITEMS MUST BE ANSWERED US	ING "NONE" OR N/A WHERE APPRO	PRIATE
CHAPTER 13 MONTHLY REPORT FO	R INDIVIDUALS ENGAGED IN BUSI	<u>NESS</u>
1. Cash on Hand (on filing date, or theres	after, from prior reporting period)	1,498.91
2. Receipts (Sales) 27	7,095.62	
a. Salary and Commissions	2,544.00	
b. Interest or (Membership club)	100.00	
c. TOLLS	200.00	
d. Other (TRUSTEE)	446.03	
TOTAL RECEIPTS "		6.000.00
3. Disbursements:	22,016.30	
a. Taxes - IRS (CPA SLYVIE)	245.00	
b. Taxes-State, including any sales tax due		
c. Taxes-Real Estate (PoSTAL bill	ice Son. 134.60	
d. Other Office Supply	135.44	
e. Utilities (phone Source) _	/32.67	
f. 15torage Rent	282.62	
g. Insurance premiums(TNUCK) _	214.20	
h. Food	613.40	
i. Medical (Bank fee) _	76.54	
j. TRUCK Repair _		
k. Truck expenses Gas _	491-68	

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CASE NO. 13-15577 MONTH ENDING 11-30-2
1. Clothing
m. Gifts - donations 1) 100.00
o. Other (Returns Muchandix) 189.93
TOTAL DISBURSEMENTS
4. Balance at end of reporting period [$(1-2)-3$] $\frac{21,841.80}{}$
5. Are you paying all your debts (post filing) as they are incurred? If not, list outstanding obligations and amounts due at end of current period on Schedule C. 425
6. Is all insurance paid up-to-date? 4es
Debtor in Possession Checking Account(s):
NAME, LOCATION AND NUMBER(S) TD BANK 4744 7131
BRANCH 1321 ROUTE 22, Phillisburg, NJ 08833
Debtor in Possession Savings Account(s) and Investments, including IRA's, Keogh, Pension:
DESCRIBE: NA
BRANCH: NA
SCHEDULE A
(2)(d) Other:

SCHEDULE B

Gifts – donations/Name(s) of recipient(s): N

Tuition(s) list name and school(s): NN

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CASE NO. 13-15577

MONTH ENDING _//-30-20/6

SCHEDULE C

Outstanding obligations: (List payee and date incurred).

I DECLARE THAT I HAVE EXAMINED THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE AND CORRECT. I FURTHER CERTIFY THAT ALL TAX REPORTS OR RETURNS WHICH BECAME DUE DURING THE REPORTING PERIOD HAVE BEEN FILED AND ALL REQUIRED PAYMENTS MADE.

SIGNATURE OF DEBTOR(S)

11/14//6